FEC FORM 1

STATEMENT OF ORGANIZATION

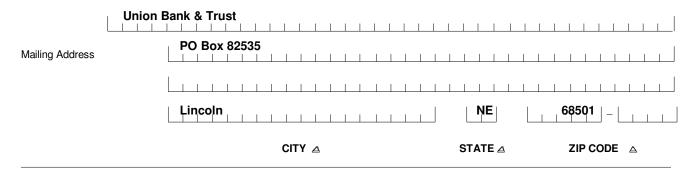
FORM 1	0	(See instruction			Office use only
NAME OF COMMITTEE (in	full) (C	check if name changed)	Example: If typying, type over the lines	12FE4M5	
Nebraska Rep	oublican Party				1
ADDRESS (number and	1610 N	Street			
(Check if addliss changed)	ress Lincoln	<u>, , , , , , , , , , , , , , , , , , , </u>		NE L	68508
COMMITTEE'S E-MA	JI ADDRESS		CITY	STATE▲	ZIP CODE ▲
					1
COMMITTEE'S WEB	PAGE ADDRESS (URL				
1					1
COMMITTEE'S FAX I 402-475-3541		v v v			
2. DATE 0.6	M / D D / Y	2006			
3. FEC IDENTIFICA	ATION NUMBER	C	C C00032334		
4. IS THIS STATEM	MENT X NEW (I	N) OR	AMENDED (A)		
I certify that I have exam	nined this Statement and to	the best of my know	rledge and belief it is true, correct a	and complete	
Type or Print Name of	Treasurer Ro	dney Krogh			
Signature of Treasure	r Electronically Filed b	y Rodney Kr	ogh	Date 06	19 / 2006
NOTE: Submission of fa	•	-	subject the person signing this Sta	•	es of 2 U.S.C. S437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)						
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	Name of Candidate						
	Party Affiliation Sought: House Senate President	State					
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name of Candidate						
(d) X This committee is a STA (National, State (or subordinate) committee of the REP (Democratic, Republican, etc.) For the Committee is a separate segregated fund							
							(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee.
6.	Name of Any Connected Organization or Affiliated Committee						
ı	SMITH NEBRASKA VICTORY 06	.					
<u> </u>							
228 SOUTH WASHINGTON ST, STE 115							
	Mailing Address						
CITY STATE ZIP CODE							
	Relationship JOINT FUNDRAISING REPRESENTATIVE						
Type of Connected Organization:							
	Corporation Corporation w/o Capital Stock Labor Organization						
	Membership Organization Trade Association Cooperative						

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Write or Type Commit	tee Name					
Nebraska Rep	ublican Party					
	ords: Identify by nam ommittee books and re		nber optional), and pos	sition of th	e person in	
Full Name	Carlos Castillo					
Mailing Address		1610 N Street				
		Lincoln	N	<u> </u>	68508	
Title or Position ♥		CITY A	STA	TE▲	ZIP COI	DE A
ir	nterim Director		Telephone number	402	475	2122
Full Name of Treasurer Mailing Address	Rodney Krogh	agent (e.g., assistant tre	,			
		Lincoln	N	<u>E</u> _	68508	
Title or Position ♥		CITY A	STA	TE▲	ZIP COI	DE A
т	resurer		Telephone number	402	_ 475 _	2122
Full Name of Designated Agent	Carlos Castillo					
Mailing Address		1610 N Street				
		Lincoln		E _	68508	
Title or Position ♥		CITY A	STA	TE▲	ZIP COD	DE A
lr	nterim Director		Telephone number	402	_ 475 _	2122

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.



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safety deposit boxes or maintains funds.	all banks or other depositories in which the committee	
Name of Bank, Depository, etc.		[ADDITIONAL]
BB&T 1909 Mailing Address	OK STREET, NW SHINGTON CITY	DC 20006 - STATE △ ZIP CODE △
Name of Any Connected Organization	on or Affiliated Committee	[ADDITIONAL]
Mailing Address		
	CITY▲	STATE ▲ ZIP CODE ▲
Relationship		
Type of Connected Organization:		
Corporation	Corporation w/o Capital Stock	Labor Organization
Membership Organization	Trade Association	Cooperative

Designated Agent			[ADDITIONAL]
Full Name Mailing Address			
Title or Position ♥	CITY A		ZIP CODE A
	т	elephone number	